POSITION	INITIALS	ID NO.	DATE		
FEE DETERMINATION	8m		10- 10-0		
O.I.P.E. CLASSIFIER		59	1/2/		
FORMALITY REVIEW	July	1144	11115/01		
	INDEX (	OF CLAIMS	5/28/07		
·	Rejected	N	Non-elected		
	gh numeral) Canceled	Å	Interference Appeal		
÷	Restricted	Ω	Objected		

Claim N	÷	Res	stricted	0	Objecte	ed .
Claim N	Date	Claim	Date		Claim	Data
Final Original		Final			Original	Date,
2		51			110	+++-
<del>                                    </del>	┼┼┼┼┼┼┼	52	+		112	+++
4	<del>╃╃╇</del>	53 54	╀┼┼		113	
5	<del>┪</del>	55	╇╂┼┼	┡╼┼┤	114	
16 Y	<del>                                     </del>	56	<del>++++</del> -	++++	115 116	
7		57	<del>++++</del>		117	+++
8	++++	58			118	+
10	++++-	59			119	++-
13/11/	++++	60	<del></del>		110	<del>                                      </del>
12	<del>┼┝┝┋╇┋</del>	61	╂═╁═╁═╁╴╁╴╏		111	
13	<del>                                     </del>	63	<del>┞╶┞┈┟┈╏</del>	+++	112	+
14		64	<del>┞┈┠┈╏╸╏╸╏</del>	<del></del>	113	+
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17	┾┾┼╁╁╁	67			117	<del>                                     </del>
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	<del>┞╄╍╁┋</del>	69	+++++	_ _ _	119	
20	<del>┞┞┈┞┈┞┈┞┈</del> ┼┈┼┈┼	70	<del>┞╸╏╶╏</del> ╶╏		120	
22	<del>╿╸╿</del> ╶┦ <del>╶┦</del> ╶┦╶┦	72	<del>┞╶┨╶┨╶</del> ┨	<del></del>	121	
23	<del>                                     </del>	73	<del>├─┼─┼</del> ─┼	╅╂╂╢║	122	
24		74	<del>╏╺╏</del> ╺╏╸╂╸╂╸╂	<del>╶├</del> ┼┼┤	124	╁╂┼
25		75		<del>-                                     </del>	125	+++
26	<del>┞┼╡</del> ┼╁╁┧	76			126	<del>┞┤┥┥</del>
28	<del>┞┈┤┈┤┈╎┈</del> ┤	* 77			127	<del>1                                    </del>
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29 30	*	70	╼╁╼╁╧╂╌╁	┽┽┼┤┞	129	
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33		83		<del></del>	133	
34 35	++++	84			134	<del>-                                     </del>
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37	<del>╶╂╊╂╂╅┥</del>	87		+++	136	
38	<del>- - - - - - -</del>	88	╅╅╅	╌╂╌╂╌┦╴╶├	137	
39		89	╅╂┼	╫╫╫╢╟	138	
40		90	<del>                                      </del>	<del>┧═╏═╏</del> ═┨	139	+++
41		91	<del>                                      </del>	<del>╅═╂═╏</del> ┈╏	141	
42		92	<del>                                      </del>	<del>┦╌</del> ┦╌╂╌╣ ┠╴	142	
43	++++	93		<del>                                     </del>	143	<del>-         -</del>
45		94			144	<del>                                      </del>
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48	╁╁╁╁┼┤	98	╅╁╁	╀╃╃┩┞	147	11
49	<del>                                      </del>	99	╅╅╃	╂╌╂╌┦╴┠╴	148	

If more than 150 claims or 10 actions staple additional sheet here

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